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Documents Transmitted:**Amendment Transmittal; Second Preliminary Amendment.****Applicant(s):****Kenneth J. Newell, Stephen A. Ruatta, John S. Stockwell****Appl. No.:****10/815,510****Filed:****April 1, 2004****Group Art Unit:****1732****Examiner:****To be determined****3D Systems Docket No.:****USA.286-2**

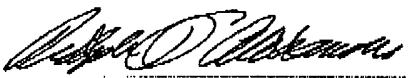
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AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Kenneth J. Newell, Stephen A. Ruatta, John S. Stockwell				Docket No. USA.286-2	
Application No. 10/815,510	Filing Date April 1, 2004	Examiner To be determined	Customer No. 22514	Group Art Unit 1732	Confirmation No. 9370
Invention: POST PROCESSING THREE-DIMENSIONAL OBJECTS FORMED BY SELECTIVE DEPOSITION MODELING					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	3 -	4 =	0 x	\$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-0900 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 <i>Signature</i> Ralph D'Alessandro, Reg. No. 28,838 Attorney for Applicant					
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